

**Reporting Title:** Probe, Each Additional (CLLMF)

**Performing Location:** Rochester

**Specimen Requirements:**

This test is for billing purposes only.

This is not an orderable test.

**Supplemental Report:**

No

**CPT Code Information:**

88271 x 2

88275 x1 - FISH Probe, Analysis; each additional probe set (if appropriate)

**Reference Values:**

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This is not an orderable test.